



Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2008		Complete if Known	
		Application Number	10/024,648-Conf. #2636
		Filing Date	December 19, 2001
		First Named Inventor	Heather J. Belmont
		Examiner Name	A. M. S. Wehbe
		Art Unit	1633
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	49663(48340)
TOTAL AMOUNT OF PAYMENT	(\$)	525.00	

METHOD OF PAYMENT (check all that apply)

Check
 Credit Card
 Money Order
 None
 Other (please identify): _____

Deposit Account
 Deposit Account Number: 04-1105
 Deposit Account Name: Edwards Angell Palmer & Dodge LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below
 Charge fee(s) indicated below, **except for the filing fee**

Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17
 Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	_____
Design	210	105	100	50	130	65	_____
Plant	210	105	310	155	160	80	_____
Reissue	310	155	510	255	620	310	_____
Provisional	210	105	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	210	105
Multiple dependent claims	370	185

19 - ¹²³ x = **Multiple Dependent Claims**
 HP = highest number of total claims paid for, if greater than 20.
Fee (\$) **Fee Paid (\$)**

5 - ¹¹ x =
 HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	- 100 = _____	/50 = _____ (round up to a whole number) x _____	= _____	= _____

4. OTHER FEE(S)

Description	Fee (\$)	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)		
Other (e.g., late filing surcharge): <u>2253 Extension for response within third month</u>		<u>525.00</u>

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	53,624	Telephone	(617) 517-5543
Name (Print/Type)	Jonathan M. Sparks, Ph.D.	Date	June 12, 2008		



AMENDMENT TRANSMITTAL LETTER

Docket No.
49663(48340)

Application No. 10/024,648-Conf. #2636	Filing Date December 19, 2001	Examiner A. M. S. Wehbe	Art Unit 1633
---	----------------------------------	----------------------------	------------------

Applicant(s): Heather J. Belmont et al.

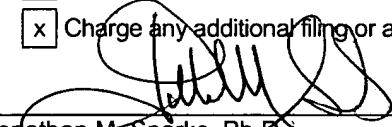
Invention: TRANSGENIC ANIMALS COMPRISING A HUMANIZED IMMUNE SYSTEM

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.
The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	19	- 123 =		x	
Independent Claims	5	- 11 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within third month					525.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					525.00

- Large Entity Small Entity
- No additional fee is required for this amendment.
- Please charge Deposit Account No. 04-1105 in the amount of \$ 525.00.
A duplicate copy of this sheet is enclosed.
- A check in the amount of \$ _____ to cover the filing fee is enclosed.
- Payment by credit card. Form PTO-2038 is attached.
- The Director is hereby authorized to charge and credit Deposit Account No. 04-1105 as described below. A duplicate copy of this sheet is enclosed.
- Credit any overpayment.
- Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.



Jonathan M. Sparks, Ph.D.
Attorney/Agent Reg. No.: 53,624

Dated: June 12, 2008

EDWARDS ANGELL PALMER & DODGE LLP
P.O. Box 55874
Boston, Massachusetts 02205
(617) 517-5543



Application No. (if known): 10/024,648

Attorney Docket No.: 49663(48340)

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EM 005395251 US in an envelope addressed to:

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on June 12, 2008
Date

Signature

Jonathan M. Sparks, Ph.D.

Typed or printed name of person signing Certificate

53,624
Registration Number, if applicable

(617) 517-5543
Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee Transmittal (1 page)
Amendment Transmittal (1 page)
Three Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
Amendment and Response to Office Action (11 pages)
Two (2) References
Charge \$525.00 to deposit account 04-1105